

Summary of Child Welfare Waiver Demonstrations

Introduction: A total of 29 States, the District of Columbia, and one Tribe are currently implementing 33 child welfare waiver demonstrations: Ten new demonstrations were approved for implementation in fiscal year (FY) 2014; eight new demonstrations were approved for implementation in FY 2013; nine new demonstrations received approval to implement in FY 2012; and six demonstrations are operating under five-year extensions. As summarized in the four tables below, title IV-E agencies will implement or have implemented a wide range of interventions, including specific evidence-based or promising programs that improve child safety and permanency, with a special emphasis on trauma and increased child and family well-being. Title IV-E agencies will use a variety of screening and assessment tools to assess and measure changes in child and family development and functioning over time. The waiver demonstrations will expand the child welfare knowledge base regarding what works to improve safety, permanency, and well-being for children and their families.

Table 1. Child Welfare Waiver Demonstrations Approved in FY 2014

Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
AZ	Statewide Targets all children ages 0–18 who are in any congregated care placement or who are at risk of entering congregated care at the start of or during the demonstration.	To “right-size” the State’s current congregated care system through a comprehensive approach to ensuring children and youth receive the highest level of treatment and care needed in the least restrictive setting. Specific strategies include efforts to: <ul style="list-style-type: none"> • Increase family engagement • Improve effective case planning • Increase the supports available in the community Demonstration also includes one or more evidence supported interventions (TBD), such as: <ul style="list-style-type: none"> • Motivational Interviewing • Family Finding • Expansion of Team Decision Making • Wraparound Services • Project Keep (Keeping Foster and Kin Parents Supported and Trained) 	<ul style="list-style-type: none"> • Reduced lengths of stay in out-of-home care • Reduced use of congregated care as a placement option • Reduced lengths of stay in congregated care • Increased timeliness of reunification • Reduced re-entry into congregated care • Reduced foster care re-entry rates • Specific well-being outcomes (e.g., improved physical health and development, mental health, and social and emotional well-being) will be identified in the State’s evaluation plan 	Capped allocation of title IV-E funding. <ul style="list-style-type: none"> • Foster care maintenance • Foster care administrative costs (excluding SACWIS, training, and pre-placement activities for candidates) Excludes costs associated with youth ages 18–21.
KY	Two interventions with different target populations and geographic scopes. 1. Sobriety Treatment and Recovery Teams	To address the complex needs of families experiencing challenges with substance abuse and domestic violence. START includes addiction services, family preservation, community partnerships, and best practices in child welfare and substance abuse treatment. Evidence-based	<ul style="list-style-type: none"> • Decreased recurrence of maltreatment • Decreased presence of domestic violence • Decreased rates of out-of-home placement while 	Capped allocation of title IV-E funding. <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative

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KY <i>Cont.</i>	<p>(START) is currently active in part of the State and will expand to additional counties (TBD).</p> <p>START's target population is all children ages 0–5 whose parents have substance use risk factors and whose children are at moderate to imminent risk of entering out-of-home care.</p> <p>2. Early Specialized Focus on Permanency (ESFP) may begin in one or more child welfare regions (TBD) and will ultimately expand statewide.</p> <p>ESFP's target population is all children ages 0–9 whose parents have substance abuse and/or domestic violence risk factors and whose children are at moderate to imminent risk of entering out-of-home care.</p>	<p>programs for delivering treatment may include, motivational interviewing, the Matrix Model program, and Seeking Safety therapy.</p> <p>ESFP is an in-home services program within which all contracted providers must offer two evidence-based practices that may include:</p> <ul style="list-style-type: none"> • Active Parenting (AP) NOW • AP Teen • (Brief) Strategic Family Therapy • Cognitive-Behavioral Therapy • Dialectical Behavior Therapy (DBT) • Homebuilders Model • Motivational Interviewing • Nurturing Parents Programs (NPP) • Parent-Child Interaction Therapy (PCIT) • Seven Challenges • Solution-Focused Therapy • Systematic Training for Effective Parenting (STEP) • Trauma-Focused Cognitive Behavior Therapy (TF-CBT) <p>Children and families will participate in either START or ESFP, never both.</p>	<p>receiving services</p> <ul style="list-style-type: none"> • Decreased rates of out-of-home placement after case closure • Decreased length of time in out-of-home placement • Increased exits to permanency through reunification • Decreased rates of re-entries into out-of-home placement • Increased family functioning • Decreased trauma experienced by children • Increased child well-being • Increased behavior and emotional and social functioning of children • Increased rates of recovery from substance abuse • Decreased severity of parental drug and alcohol abuse • Decreased primary caregiver depression • Increased child sensory processing abilities 	<p>costs (excluding SACWIS and training)</p>
ME	<p>Will begin in one child welfare region and ultimately expand statewide.</p> <p>Targets all title IV-E eligible and non-IV-E eligible children ages 0–5 who are involved with the child welfare system and their parents, including children who are in or at risk of out-of-home placement.</p>	<p>To provide parental education and support services and substance abuse interventions. The parental education and support service interventions that may be implemented include:</p> <ul style="list-style-type: none"> • Child-Parent Psychotherapy • Parent-Child Interaction Therapy • Positive Parenting Program (Triple P) • Attachment and Bio-behavioral Catch-Up <p>The substance abuse interventions that may be implemented include:</p>	<ul style="list-style-type: none"> • Increased number of children staying safely in their homes • Increased rates of reunification • Improved timeliness of reunification • Decreased number of reports of repeat maltreatment • Decreased re-entries into out-of-home care • Improved family well-being 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding SACWIS and training) <p>Excludes costs associated with youth ages 18–20.</p>

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ME <i>Cont.</i>		<ul style="list-style-type: none"> • Sobriety Treatment and Recovery Teams (START) • Motivational Interviewing • Seeking Safety • Community Reinforcement and Vouchers 	<ul style="list-style-type: none"> • Decreased rates of parental substance abuse 	
MD	<p>Will begin in one child welfare region in the State and ultimately expand statewide.</p> <p>Targets all title IV-E eligible and non-IV-E eligible children ages 0–8 and 14–17 who are involved with the child welfare system, including those in or at risk of out-of-home placement and their parents.</p>	<p>To create a trauma-informed system of care that uses standardized trauma-informed assessments to identify services and supports for children and families designed to prevent out-of-home care and re-entries into care.</p> <p>In addition, the State will introduce new or expand existing intensive family preservation, post-permanency services, and evidence-based programs to support the State’s existing Alternative Response model and improve family functioning, safety, well-being, and permanency outcomes. The trauma-informed screening and assessments to be expanded may include:</p> <ul style="list-style-type: none"> • Safety Assessment for Every Child (SAFE-C) • Maryland Family Risk Assessment (MFRA) • Child and Adolescent Needs and Strengths Assessment (CANS MD) • CANS Family (CANS-F) <p>Evidence-based programs that may be implemented include:</p> <ul style="list-style-type: none"> • Family Connections • Homebuilders • Parent Child Interaction Therapy (PCIT) • Parent Management Training, Oregon Model (PMTO) • SafeCare • Functional Family Therapy • Multi-Systemic Therapy • Trauma-Focused Cognitive Behavioral Therapy (TF-CBT) 	<ul style="list-style-type: none"> • Increased rates of reunification, adoption or guardianship • Improved placement stability • Decreased length of stay and rates of re-entry into foster care • Increased use of the alternative response track compared to the use of the investigative response track • Decreased rates of residential treatment/group care placement among youth in care • Improved child and youth functioning • Family/youth satisfaction with programs and services provided under the waiver demonstration 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding SACWIS and training)
NV	<p>Clark County</p> <p>Primarily targets children ages 0–18 who are at risk of entering out-of-home care.</p>	<p>Safety management services model and enhanced service array.</p> <p>Safety management services include development of in-home safety plans and the provision of in-home services</p>	<ul style="list-style-type: none"> • Decreased entry rates • Decreased repeat maltreatment • Increased exits to permanency • Decreased re-entry rates 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> • Foster care maintenance costs

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NV <i>Cont.</i>	The target population may be expanded to include children placed in out-of-home care on or after the demonstration's implementation date.	and supports. Safety Managers will manage, perform, and coordinate all safety services. Additional assessment and planning tools will be implemented, including the Protective Capacity Family Assessment, the Protective Capacity Progress Assessment, and others that may be determined.	<ul style="list-style-type: none"> Improved family functioning 	<ul style="list-style-type: none"> Foster care administrative costs (excluding SACWIS and training) <p>Excludes costs associated with youth ages 18–21.</p>
OK	<p>Begins in Oklahoma County and will ultimately expand statewide.</p> <p>Targets all children ages 0–12 who are at risk of entering or re-entering foster care.</p>	<p>Intensive Safety Services (intensive home-based case management and service model) that may include:</p> <ul style="list-style-type: none"> Cognitive Behavioral Therapy Healthy Relationship Managing Child Behavior Modules Motivational Interviewing <p>Families will also be linked to services in the community, such as:</p> <ul style="list-style-type: none"> Parent Child Interaction Therapy Trauma Focused Cognitive Behavioral Therapy Substance abuse services Psychiatric services 	<ul style="list-style-type: none"> Reduced number of recurrent CPS events among those previously exposed to ISS Accelerated elimination of safety threats Decreased initial entries into out-of-home care Decrease re-entries into out-of-home care Improved social and emotional well-being for children and their families Improved parenting skills and practices 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> Foster care maintenance costs Foster care administrative costs (excluding SACWIS, training, and certain subcomponents of in-placement administration) <p>Excludes in-placement administration costs for services obtained through Tribal/State agreements, court appointed special advocates, or the Office of Juvenile Affairs.</p>
OR	<p>Statewide, beginning in selected counties and expanding to additional counties over the duration of the demonstration.</p> <p>Targets children ages 0–18 who: 1) Are in or enter out-of-home care as a result of a finding of neglect or threat of harm due to neglect; or 2) Are at risk of entering out-of-home care due to neglect or threat of harm due to neglect</p>	<p>Family Navigator services, which may include but will not be limited to:</p> <ul style="list-style-type: none"> Assisting the family in accessing appropriate services for which it is eligible Assisting the family in completing necessary paperwork to access services Helping families get to and from appointments on time and prepared Helping decrease the parent's/family's fear and anxiety regarding its circumstances and interfacing with multiple health and human service systems Assisting with life skills development 	<ul style="list-style-type: none"> Decreased time to exit/permanency Increased reunification rates Decreased entry rates Decreased re-entry rates Decreased repeat maltreatment Improved child well-being in domains of mental health, education, and physical health 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> Foster care maintenance costs only <p>Excludes costs associated with youth ages 18–21.</p>
Port Gamble S'Klallam	Kitsap County, Washington and the PGST Indian	<p>For target population #1:</p> <ul style="list-style-type: none"> Positive Indian Parenting (parent education 	Due to the small sample of children, the demonstration's	Capped allocation of title IV-E funding.

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Tribe (PGST)	<p>Reservation, which is located within Kitsap County.</p> <p>Two target populations:</p> <ol style="list-style-type: none"> 1. All children within the Tribe's title IV-E service population whose families are in the Tribe's dependency caseload 2. All children within the Tribe's title IV-E service population whose families are involved in the child welfare system 	<p>curriculum emphasizing addressing historical trauma and traditional cultural teaching as a base for effective parenting)</p> <p>For target population #2:</p> <ul style="list-style-type: none"> • Family Group Decision Making (FGDM) 	<p>evaluation will be primarily qualitative, and focused on the following outcomes:</p> <ul style="list-style-type: none"> • Improved parenting skills/demonstration of improved parenting behaviors • Increased stability for children placed in foster homes • Improved family connections/ dynamics/supports for families • Increased options for long-term placement of youth • Reduced time to reunification • Reduced re-entries into care 	<ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding TACWIS and non-TACWIS automated systems and training)
TX	<p>Harris County</p> <p>Targets all title IV-E eligible and non-IV-E eligible children and youth ages 0–18 who entered conservatorship for the first time during a cohort year and entered paid foster care within 60 days of conservatorship entry and had an initial goal of family reunification.</p> <p>At the option of the State, the demonstration may be expanded to serve additional children within Harris County who have an initial removal and entry into paid foster care within 60 days and an initial permanency goal of placement</p>	<p>The State will implement the Child and Adolescent Needs and Strength (CANS) assessment tool and selected evidence-supported programs that meet specific needs of the target population or address identified service gaps. All children in the target population will have an initial CANS assessment to identify needs at the child and family level that require intervention. Results from the CANS will facilitate the State's decision in the selection and implementation of appropriate service strategies for children and families.</p> <p>Evidence-supported programs that may be implemented include:</p> <ul style="list-style-type: none"> • Multidimensional Treatment Foster Care (MTFC) - Adolescents and Preschoolers • Level IV Triple P (Positive Parenting Program) • KEEP (Keeping Foster and Kin Parents Supported and Trained) • Parent Management Training: Oregon Model (PMTO) 	<ul style="list-style-type: none"> • Increased rates of reunification • Decreased time to reunification • Decreased re-entry into care for the targeted population <p>Additionally, the outcome evaluation will address, at a minimum, the extent to which selected evidence supported programs affect changes in the following outcomes:</p> <ul style="list-style-type: none"> • Child well-being • Child and family functioning • Parent behavior and skills • Parent-child interactions • Family cohesion 	<p>Capped allocation of title IV-E funding for Harris County.</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding SACWIS, training, and pre-placement activities for candidates and all in-placement subcategories except for provider management (CB-496 Part 1, line 8))

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TX <i>Cont.</i>	with relatives or adoption.	<ul style="list-style-type: none"> SafeCare 		
WV	<p>Will begin in two child welfare regions with plans to expand statewide.</p> <p>The demonstration will target youth ages 12–17 who are in or at risk of entering congregate care placement.</p>	<p>Wraparound service model based on the National Wraparound Initiative Model.</p> <p>The demonstration will incorporate evidence-based, evidence-informed, and promising practices to coordinate services for eligible youth and their families. Family Team Conferencing will be utilized to develop or revise youth and family treatment plans.</p> <p>West Virginia Child and Adolescent Needs and Strengths Assessment (WVCANS) will be implemented universally across child-serving systems.</p> <p>Additional assessment and planning tools may include:</p> <ul style="list-style-type: none"> Comprehensive Assessment and Planning System (CAPS) Family Functioning Assessment Protective Capacity Family Assessment Youth Behavioral Evaluation Early Periodic Screening Diagnosis and Treatment Casey Life Skills Assessment 	<ul style="list-style-type: none"> Decreased congregate care placement rates Decreased length of stay in congregate care Increased number of youth remaining in their home communities Decreased entry rates Decreased repeat maltreatment Improved child well-being Improved educational achievement Improved educational stability Improved family functioning 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> Foster care maintenance costs Foster care administrative costs (excluding SACWIS and training) <p>Excludes costs associated with youth ages 18–21.</p>

Table 2. Child Welfare Waiver Demonstrations Approved in FY 2013

Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
DC	<p>District-wide</p> <p>Targets all children and families involved with the District of Columbia's Child and Family Services Agency (CFSA) including those who come to the attention of CFSA and are diverted from the formal child welfare investigation track to community-based services (Family Assessment).</p>	<p>To expand the use of evidence-based family preservation, post-reunification, and prevention services through contracts with private community-based agencies. Prevention services to be expanded include those focused on:</p> <ul style="list-style-type: none"> • Parent education and support programs • Home visiting • Father-child attachment • Older youth ages 10–17 who have committed status offenses. <p>The District will also implement the following two new evidence-based programs:</p> <ul style="list-style-type: none"> • Homebuilders (intensive in-home family preservation services) • Project Connect (intensive in-home family preservation and/or reunification services) 	<ul style="list-style-type: none"> • Decreased new reports of maltreatment • Decreased repeat maltreatment • Decreased time to exit/permanency • Increased exits to permanency • Decreased entry rates • Decreased re-entry rates • Improved family functioning • Improved educational achievement • Improved social and emotional functioning 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding SACWIS and training) <p>Includes costs associated with youth ages 18–21.</p>
HI	<p>Begins on two islands (O'ahu and Hawai'i) with possible expansion to additional islands.</p> <p>Two target populations:</p> <ol style="list-style-type: none"> 1. Families who come to the attention of Child Welfare Services through a hospital referral or police protective custody and who are likely to be placed into care for fewer than 30 days 2. Children and youth who have been in foster care for nine months or longer 	<p>For target population #1:</p> <ul style="list-style-type: none"> • Crisis Response Team to determine the appropriate child welfare system response (e.g. voluntary case management services, mandatory in-home services, or foster care) • Intensive Home-Based Services: Intervention includes the use of Rapid Assessment Instruments (e.g., North Carolina Family Assessment Scale, or NCFAS) and is based on the Homebuilders model <p>For target population #2:</p> <ul style="list-style-type: none"> • Safety, Permanency, and Well-Being Roundtables (multi-disciplinary case staffing to facilitate permanency for youth who have been placed out of the home for more than 9 months) • Wraparound Services (multidisciplinary, comprehensive service planning and delivery to keep youth in the home or in the community) • Rapid Assessment Instruments (e.g., Child and Adolescent Needs and Strengths, or CANS) 	<ul style="list-style-type: none"> • Decreased entry rates • Decreased re-entry rates • Decreased length of stay • Improved child and family well-being 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding training, SACWIS, and non-SACWIS automated systems costs) <p>Excludes costs associated with youth ages 18–21.</p>

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Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
ID	<p>Statewide</p> <p>Targets children ages 0–18 with an open child welfare case and their families. Phase I will focus on children who are in or enter out-of-home placement during the course of the demonstration; Phase II will include children who are at risk of removal from home.</p>	<ul style="list-style-type: none"> Family Group Decision Making Nurturing Parenting Program Trauma-informed system of care <p>The trauma-informed system of care will include training and workforce development in trauma-informed practices; implementation of a universal trauma screening instrument; and implementation of trauma-informed evidence-based programs and practices (e.g., Trauma-Focused Cognitive Behavioral Therapy and Parent-Child Interaction Therapy). Individual regional child welfare districts may implement additional interventions.</p>	<ul style="list-style-type: none"> Increased number of families served in-home Decreased entry rates into foster care Increased exits to permanency through reunification, adoption, and guardianship Decreased time to exit/permanency Increased placement stability Decreased congregate care placement rates Improved child well-being 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> Foster care maintenance costs Foster care administrative costs (excluding SACWIS and training) <p>State law does not allow most child welfare services beyond age 18.</p>
MT	<p>Begins in 5 counties (Cascade, Lewis and Clark, Missoula, Yellowstone, and Silver Bow Counties) with possible expansion statewide.</p> <p>Three target populations:</p> <ol style="list-style-type: none"> Children ages 0–5 who are at risk of out-of-home placement due to neglect Children ages 0–12 who are in kinship foster care Children ages 0–18 placed in residential treatment centers or therapeutic group homes 	<p>For target population #1:</p> <ul style="list-style-type: none"> Intensive In-Home Services, including Family Group Decision Making; concrete support services; and in-home promising or evidence-based interventions that provide parenting education and support such as Safe Care, Family Spirit, and Parents as Teachers <p>For target population #2:</p> <ul style="list-style-type: none"> Intensive Family Re-engagement Services, including Team Decision Making; in-home visits; and other evidence-based services such as Trauma Focused Cognitive Behavioral Therapy; Parent Child Interaction Therapy; Positive Parenting Program-Triple P (parenting education); The Incredible Years (parenting education); the Attachment, Self-Regulation, and Competency (ARC) model (comprehensive framework for intervention with youth exposed to trauma); and High Fidelity Wrap-Around Services <p>For target population #3:</p> <ul style="list-style-type: none"> Intensive Family Reintegration Services that include the Family Find model (a process to identify family members and other supportive adults who are willing to become permanent connections for a child placed 	<ul style="list-style-type: none"> Decreased out-of-home placement rates Decreased time to exit/permanency Increased exits to permanency through reunification, guardianship, and adoption Decreased repeat maltreatment Increased kinship placement rates Decreased congregate care placement rates Decreased length of stay in congregate care Increased step-downs from congregate care to less restrictive placement settings Improved child well-being and family functioning 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> Foster care maintenance costs Foster care administrative costs (excluding SACWIS, training, and agency administration) <p>Excludes costs associated with youth ages 18–21 and Tribal/State title IV-E agreements.</p>

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Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
MT <i>Cont.</i>		out of the home); High Fidelity Wrap-Around Mental Health Services; and youth-centered meetings and youth engagement		
NE	<p>Two interventions with different target populations and geographic scopes.</p> <p>1. Alternative Response (AR) begins in five counties (Dodge, Hall, Lancaster, Sarpy, and Scotts Bluff) and will expand statewide.</p> <p>AR's target population is all children ages 0–18 who can remain safely at home through the provision of in-home services</p> <p>2. Results Based Accountability (RBA) is implemented statewide.</p> <p>RBA's target population is all children ages 0–18 served by the child welfare agency</p>	<p>Alternative Response (AR), a differential response pathway for screened-in allegations of abuse and neglect as an alternative to traditional Child Protective Services investigations (For target population #1). AR will include linkages to an expanded array of evidence-based programs and services such as:</p> <ul style="list-style-type: none"> • Parent Child Interaction Therapy • Positive Parenting Program – Triple P • Wraparound Services <p>The state will incorporate Results Based Accountability into the State's contract and performance management systems for contracted child welfare service providers in order to improve key child safety, permanency, and well-being outcomes achieved through the services provided to children and families</p>	<ul style="list-style-type: none"> • Decreased repeat maltreatment, allegations, and substantiated reports • Decreased entry rates into foster care • Increased placement stability • Decreased time to exit/permanency • Decreased re-entry rates following exits to permanency • Decreased time to adoption after termination of parental rights • Improved child and family well-being 	<p>Capped allocation of title IV-E funding.</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding SACWIS and training) <p>Excludes costs associated with youth ages 18–21.</p>
NY	<p>Begins in New York City and may expand to additional counties or jurisdictions.</p> <p>Targets all children/youth ages 0–21 years currently in out-of-home placement in regular family foster care or at home receiving</p>	<p>A new city-wide model of foster care services called <i>ChildSuccessNYC</i>. Primary components may include:</p> <ul style="list-style-type: none"> • Parenting Through Change (parenting education and support) • Family Finding • Keeping Foster and Kin Parents Trained and Supported (parenting education and support for foster parents) • Youth Development Skills Coaching 	<ul style="list-style-type: none"> • Increased child social and emotional well being • Decreased time to exit/permanency • Increased placement stability • Decreased re-entry rates 	<p>Capped allocation of title IV-E funding (based on claims submitted for program costs expended by New York City Administration for Children's Services)</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative

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NY <i>Cont.</i>	post-reunification aftercare services.	Any additional participating counties or jurisdictions will implement a different package of interventions that may include: <ul style="list-style-type: none"> • Functional Family Therapy • Parenting with Love and Limits (a combination of group and family therapy for youth with severe emotional and behavioral problems and their families) • Multi-Systemic Therapy for Child Abuse and Neglect • Multidimensional Treatment Foster Care (therapeutic foster care to decrease problem behaviors in children/youth) 		costs (excluding SACWIS and training) Includes costs associated with youth ages 18–21. Excludes costs from local social services districts within the state other than ACS and any such costs incurred directly by the title IV-E state agency.
RI	Statewide with implementation phased in by child welfare Region and Unit. Targets children and youth primarily between the ages of 6 and 18 that are in or are at significant risk of going into congregate care and their families.	To expand the Rhode Island Wraparound Services model to include children in congregate care placements and their families. Depending on the needs of each child and family, additional interventions that may be offered include: <ul style="list-style-type: none"> • Multi-Systemic Therapy for Child Abuse and Neglect • Parenting with Love and Limits • Enhanced Family Support Services • Strengthening Families (a family skills training program) • Preserving Family Networks (a flexible service model to prevent placement or assist with successful transitions from residential or hospital settings into the community) 	<ul style="list-style-type: none"> • Increased placement stability • Increased discharges from congregate care to permanent placement with a family • Decreased proportion of discharges from congregate care to non-permanent settings (e.g., runaways, transfer to the custody of another agency) • Decreased time to exit/permanency • Decreased re-entry rates following exits to permanency • Decreased initial and repeat maltreatment • Improved child well-being 	Capped allocation of title IV-E funding <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding SACWIS and training) Excludes costs associated with youth ages 18–21.
TN	Statewide, with implementation staggered by child welfare Region. Two target populations: 1. All children ages 0-17 who are in the non-custodial (non-	For target population #1: <ul style="list-style-type: none"> • Statewide Risk and Safety Assessment Protocol using the Family Assessment and Screening Tool (FAST) For target populations #1 and #2: <ul style="list-style-type: none"> • Project KEEP (for foster parents of children in custodial care) • Parental substance abuse services (to be determined) 	<ul style="list-style-type: none"> • Decreased entry rates • Decreased repeat maltreatment • Decreased re-entry rates following exits to permanency • Improved child and family functioning and well-being 	Capped allocation of title IV-E funding <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding SACWIS and training)

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Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
TN <i>Cont.</i>	placement) care 2. Children in custodial care (out-of-home placement)	<ul style="list-style-type: none"> Parenting education and support program (to be determined) 		Excludes costs associated with youth ages 18–21.

Table 3. Child Welfare Demonstrations Approved in FY 2012

Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
AR	Initial implementation in Year 1 focused on 8 counties with statewide expansion planned. Targets all children referred to child welfare services for child abuse/neglect or already receiving services.	Improved array of community based services, including: <ul style="list-style-type: none"> • Nurturing Parenting Program (a parenting education and support program) • Enhanced assessment (Child and Adolescent Needs and Strengths, or CANS) • Permanency Round Tables (multi-disciplinary case staffing to facilitate permanency) • Team Decision Making • Targeted recruitment of foster care providers • Differential Response (a program to divert families from the formal child welfare investigative track and connect them to community resources) 	<ul style="list-style-type: none"> • Decreased entry rates • Decreased time to exit/permanency • Improved child and family well-being • Increased exits to permanency • Decreased repeat maltreatment 	<p>Capped allocation of title IV-E funding</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding training, SACWIS, and non-SACWIS automated systems costs) <p>Excludes costs associated with youth ages 18–21.</p>
CO	Statewide for 3 core interventions; individual counties to implement additional programs/interventions. Targets children with screened-in reports of abuse/neglect and those already in open child welfare cases.	<p>Primary Interventions:</p> <ul style="list-style-type: none"> • Family engagement • Trauma informed child assessment • Trauma focused behavioral health treatment, such as Trauma Focused Cognitive Behavior Therapy and Coping Cat (a cognitive-behavioral treatment for children with anxiety) <p>Additional interventions to be determined based on specific needs of counties.</p>	<ul style="list-style-type: none"> • Improved child emotional, behavioral, and social functioning • Increased parenting skills and capacity • Decreased entry and re-entry rates • Increased placement with kin caregivers • Decreased new and repeat maltreatment • Decreased time to exit/permanency • Decreased congregate care placement rates 	<p>Capped allocation of title IV-E funding</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding training, SACWIS, and non-SACWIS automated systems costs)
IL (IB3)	Cook County Targets children ages 0–3 entering out-of-home placement for the first time.	<ul style="list-style-type: none"> • Nurturing Parenting Program • Child Parent Psychotherapy 	<ul style="list-style-type: none"> • Improved developmental progress for children and toddlers • Increased reunification rates • Decreased time to exit/permanency • Decreased re-entry rates 	Experimental design
MA	Statewide Targets youth transitioning	<ul style="list-style-type: none"> • Follow Along (intensive home-based family interventions and supports to children and their families and caregivers) 	<ul style="list-style-type: none"> • Improved youth well-being • Decreased time in congregate care 	Capped allocation of title IV-E funding

Table 3. Child Welfare Demonstrations Approved in FY 2012

Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
MA <i>Cont.</i>	out of congregate care or at risk of congregate care placement.	<ul style="list-style-type: none"> Stepping Out (comprehensive case management services for youth transitioning to independent living after receiving congregate care services) Continuum Services (Family treatment, care coordination, outreach and crisis support services to enable family preservation) Family Partners (a peer mentoring program for parents and caregivers) 	<ul style="list-style-type: none"> Increased placement stability Decreased re-entry rates 	<ul style="list-style-type: none"> Foster care maintenance costs Foster care administrative costs (excluding SACWIS and training) <p>Excludes costs associated with youth ages 18–21</p>
MI	<p>Begins in three counties, with possible expansion to three additional sites in year three of the demonstration.</p> <p>Targets families with children ages 0–5 that have been investigated by child welfare and are determined to be at high risk of child maltreatment.</p>	<ul style="list-style-type: none"> Trauma Focused Cognitive Behavioral Therapy Parent Child Interaction Therapy Parent Infant Psychotherapy Nurse-Family Partnership (home visits by registered nurses) Healthy Families America (intensive home visiting program) Enhanced assessment (e.g., Trauma Screening Checklist for Young Children, Protective Factors Survey, and Devereux Early Childhood Assessment Tool) 	<ul style="list-style-type: none"> Decreased repeat maltreatment Decreased entry rates Improved child and family well-being 	Experimental design
PA	<p>Begins in 5 counties and will expand to additional counties over time.</p> <p>Targets all children ages 0–18 in or at risk of foster care placement.</p>	<ul style="list-style-type: none"> Family engagement strategies, such as Family Group Decision Making and Family Team Conferencing Enhanced child and family assessments <p>Additional interventions to be determined based on specific needs of counties.</p>	<ul style="list-style-type: none"> Decreased entry and re-entry rates Decreased time to exit/permanency Increased exits to permanency Decreased repeat maltreatment Improved child and adolescent emotional, behavioral, developmental, academic, and social functioning Improved parent functioning 	<p>Capped allocation of title IV-E funding</p> <ul style="list-style-type: none"> Foster care maintenance costs Foster care administrative costs (excluding training and non-SACWIS automated systems costs) <p>Excludes title IV-E claims from counties not participating in the demonstration.</p> <p><i>Includes</i> costs associated with youth ages 18–21 unless State amends its title IV-E State plan.</p>
UT	Begins in two child welfare offices (one serving an urban area and	<p>Improved array of community based services, including:</p> <ul style="list-style-type: none"> Enhanced child and family functional assessment 	<ul style="list-style-type: none"> Decreased repeat maltreatment 	Capped allocation of title IV-E funding

Table 3. Child Welfare Demonstrations Approved in FY 2012

Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
UT <i>Cont.</i>	one serving a rural area), followed by statewide expansion. Targets all children and families entering the child welfare system due to substantiated child abuse/neglect or dependency and are identified (via standardized assessment tools) as requiring ongoing services.	(Utah Family and Children Engagement Tool, or UFACET, established using the Child and Adolescent Needs and Strengths- Mental Health tool framework) <ul style="list-style-type: none"> • Systematic Training for Effective Parenting (a parenting education and support program) • Strengthening Families Protective Factors Framework • National Child Traumatic Stress Network's child welfare training curriculum 	<ul style="list-style-type: none"> • Decreased entry rates • Decreased length of time in foster care • Improved child and family well-being 	<ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding training, SACWIS, and non-SACWIS automated systems costs)
WA	Statewide Targets families entering the child welfare system due to substantiated child abuse/neglect that are determined to present a low to moderate risk to the child's immediate safety, health and well-being.	Differential Response, which includes the expansion and provision of services such as: <ul style="list-style-type: none"> • SafeCare (parenting education) • Incredible Years (parenting education) • Positive Parenting Program -Triple P (parenting education) • Promoting First Relations 	<ul style="list-style-type: none"> • Decreased repeat maltreatment • Decreased entry rates • Improved child and family well-being 	Capped allocation of title IV-E funding <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding SACWIS and training) <p>Excludes costs associated with youth ages 18–21.</p>
WI	Begins in one county and will expand statewide. Targets families with children ages 0–5 who have reunified with their families after temporary placement in out-of-home care and are at risk of reentry into care.	Post-reunification supportive services, such as: <ul style="list-style-type: none"> • Trauma Focused Cognitive Behavioral Therapy • Parent Child Interaction Therapy • Child Parent Psychotherapy 	<ul style="list-style-type: none"> • Decreased repeat maltreatment • Decreased re-entry rates • Improved early education outcomes • Decreased exposure to trauma • Improved child health and emotional, behavioral, and social functioning 	Capped allocation of title IV-E funding <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding training, SACWIS, and non-SACWIS automated systems costs)

Table 4. Child Welfare Demonstrations Approved Under Previous Waiver Authority

Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
CA	<p>Continued implementation in Alameda and Los Angeles Counties' Child Welfare and Probation Departments. The State will also begin implementation of the demonstration in the following eight counties: Butte, Lake, Lassen, Sacramento, San Diego, San Francisco, Santa Clara, and Sonoma.</p> <p>Targets all title IV-E eligible and non-IV-E eligible children and youth aged 0–17, who are currently in out-of-home placement or who are at risk of entering or re-entering foster care.</p>	<p>The State's demonstration will include two core service interventions:</p> <p>1) Wraparound: Probation departments in participating counties will provide Wraparound services to youth exhibiting delinquency risk factors that put them at risk of being removed from their homes and placed in foster care. Specific elements of the Wraparound model will include case teaming, family and youth engagement, individualized strength-based case planning, and transition planning.</p> <p>2) Safety Organized Practice (SOP): Child welfare departments in participating counties will implement this initiative to support the development of a statewide core practice model to further enhance social work practice. Specific elements of SOP include family engagement and assessment, behaviorally based case planning, transition planning, ongoing monitoring, and case plan adaptation as appropriate. Specific services to be implemented as part of SOP include Safety Mapping/Networks, effective safety planning at foster care entry and exit, Capturing the Children's Voice, solution-focused interviewing, motivational interviewing, and case teaming.</p> <p>In addition to these two core service interventions, participating counties may implement additional child welfare and/or probation interventions.</p> <p>Specific child and family assessment tools to implement in conjunction with the two core service interventions may include Child and Adolescent Needs and Strengths (CANS), Ages and Stages Questionnaire (ASQ), and Structured Decision Making (SDM).</p>	<ul style="list-style-type: none"> • Decreased entries into out-of-home care • Entries into the most appropriate and least restrictive placement settings • Decreased re-entries into out-of-home care • Decreased recurrence of maltreatment • Decreased re-offenses among children and youth on probation • Improved child and family functioning and well-being 	<p>Capped allocation of title IV-E finding for participating counties.</p> <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding training, SACWIS, IV-E claims from non-participating counties, IV-E In-Placement administration and provider management claims, and maintenance payments for youth at least 18 years old, but not yet 21 years old.
FL	<p>Statewide</p> <p>Two target populations:</p>	<ul style="list-style-type: none"> • Contracts with Community-Based Care (CBC) Lead Agencies responsible for coordinating and providing services and supports 	<ul style="list-style-type: none"> • Decreased re-entry rates • Decreased time to permanency 	<p>Capped allocation of title IV-E funding</p>

Table 4. Child Welfare Demonstrations Approved Under Previous Waiver Authority

Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
FL <i>Cont.</i>	<ol style="list-style-type: none"> Children ages 0–18 who are currently receiving in-home child welfare service or who were in out-of-home placement at the start of project implementation All families entering the State child welfare system with a report of alleged child maltreatment 	<ul style="list-style-type: none"> Improved array of community-based services, which include: <ul style="list-style-type: none"> Intensive early intervention services One-time payments for goods and services that help divert children from out-of-home placement (e.g., rental assistance and child care) Family Finding Improved needs assessment Long-term supports to prevent placement recidivism 	<ul style="list-style-type: none"> Increased exit to permanency through reunification or adoption Improved child well-being 	<ul style="list-style-type: none"> Foster care maintenance costs Foster care administrative costs (excluding SACWIS)
IL (AODA)	<p>Implementation in three counties (Cook, Madison, and St. Clair Counties). Enhanced RCP services begins in Cook County and may expand to additional counties over time.</p> <p>Target population for standard RCP services includes custodial parents residing in demonstration counties whose children are in or enter out-of-home placement on or after July 1, 2013, including custodial parents who deliver infants testing positive for substance exposure.</p> <p>Target population for enhanced RCP services includes families residing in Cook County who meet the requirements for standard services and who</p>	<p>Enhance the Recovery Coach Program (RCP) implemented under the State’s previous waiver demonstrations through (1) the development and use of proactive and flexible early engagement and assessment practices, and (2) the establishment of a program to provide intensive planning, assessment, and pre- and post-reunification services for families who are identified as candidates for earlier reunification.</p> <p>Standard RCP services provided under the demonstration include clinical assessment and identification, recovery plan development, intensive outreach and engagement to facilitate parents’ treatment participation and recovery, random urinalyses, housing resources, mental health services and recovery, domestic violence services, and ongoing follow-up after reunification to promote and sustain recovery and ensure child safety.</p> <p>Enhanced RCP services include:</p> <ul style="list-style-type: none"> Benchmarking (refers to a set of casework practices) Recovery and Reunification Plan (developed in collaboration with family court judges, caseworkers, and Recovery Coaches) Strengthening Families (a strategy focused on increasing family strengths and building protective factors) 	<ul style="list-style-type: none"> Improved rates of treatment access Increased participation in substance abuse treatment Decreased time between referral to and entry into substance abuse treatment Increased number of children who exist foster care and are reunified with their custodial parent Decreased time to exit/permanency Decreased repeat maltreatment Decreased re-entry rates into out-of-home placement Decreased births of substance-exposed infants Improved child and family well-being 	Experimental design

Table 4. Child Welfare Demonstrations Approved Under Previous Waiver Authority				
Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
IL (AODA) <i>Cont.</i>	are identified by the State's Juvenile Court Assessment Program as low risk and likely candidates for expedited reunification.			
IN	Statewide Children at risk of out-of-home placement and their families.	Increase the array, intensity, and accessibility of services to prevent out-of-home placement, which may include: <ul style="list-style-type: none"> • Healthy Families America (intensive home visiting program) • Homebuilders (intensive in-home family preservation services) • Substance use disorder assessments • Outpatient and residential substance abuse treatment 	<ul style="list-style-type: none"> • Decreased initial and repeat maltreatment • Decreased entry rates • Decreased time to exit/permanency • Increased exits to permanency through reunification, adoption, or guardianship • Improved child and family well-being 	Capped allocation of title IV-E funding <ul style="list-style-type: none"> • Foster care maintenance costs • Foster care administrative costs (excluding SACWIS and non-SACWIS automated systems costs) Excludes costs associated with youth ages 18–21
OH	17 counties Targets all children ages 0–17 who are at risk of, currently in, or who enter out-of-home placement during the demonstration period, as well as their parents or caregivers.	<ul style="list-style-type: none"> • Family Team Meetings • Kinship Supports (activities specifically related to the kinship caregiver including home assessment, needs assessment, support planning, and service referral and provision) Any county that implemented Supervised Visitation in a previous phase of the States demonstration may continue. Counties may implement additional supportive services that prevent placement and promote permanency for children in out-of-home care.	<ul style="list-style-type: none"> • Proportion of children with substantiated or indicated dispositions of child abuse or neglect who do not experience a placement episode • Decreased time to exit/permanency • Decreased repeat maltreatment • Decreased re-entry 	Comparison county approach
OR	Selected child welfare districts throughout the State depending on the intervention Two target populations: 1. Families with a child under age 13 that is in foster care and that have been approved	For target population #1: <ul style="list-style-type: none"> • Relationship-Based Visitation (enhanced supervised visitation program to promote reunification) For target population #2: <ul style="list-style-type: none"> • Parent Mentoring (a peer mentoring program for caregivers to assist with completion of substance abuse treatment, sobriety, and family preservation and/or reunification) 	<ul style="list-style-type: none"> • Decreased time to exit/permanency • Increased exits to permanency through reunification, adoption, or guardianship • Decreased repeat maltreatment • Decreased re-entry rates 	Experimental design

Table 4. Child Welfare Demonstrations Approved Under Previous Waiver Authority				
Jurisdiction	Target Population & Geographic Scope	Core Interventions, including Evidence-Based or Promising Programs	Key Outcomes	Method to Measure Cost Neutrality and Included Cost Categories
OR <i>Cont.</i>	for visitation outside of the child welfare agency 2. Families with an active child welfare case who have been identified as in need of substance abuse treatment			